

POSITION	INITIALS	ID NO.	DATE
	JA		06/21/01
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		26	9/6
FORMALITY REVIEW	H.T.	1117	9/10/01
RESPONSE FORMALITY REVIEW	<del>266</del> MD	1091 Jarr	10-12-01 03/11/02

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions, staple additional sheet here

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1-6-01  
 7-6-01  
 03-12-02